PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09883383

		CLAIMS AS	(Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			32					RATE	FEE	. ,	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			3∂ minus 20=		*	12		X\$ 9=	108	OR	X\$18=	-
INDEPENDENT CLAIMS			F minus 3 =		4			X40=	160,	OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=	(00	OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in colum						olumn 2		TOTAL	623,-	OR	TOTAL	
	C	LAIMS AS A	- PART II			The second second			OTHER THAN			
	3.000	(Column 1)	4 -	· (Colu		(Column 3)		SMALL	ENTITY	OR	SMALL	
*AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI		PRESENT EXTRA	*	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		= =		X40=		OR	X80=	1
t. V	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDEN	CLAIM			+135=	and the same of the	OB:	;∔270=	and the second of the second o
7								TOTAL		// I	TOTAL ADDIT. FEE	Х,
· ,•	-	(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. FEE			ADDII. I EEI	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=	1	X40 <u>=</u>	2	OR	X80=	-
	FIRST PRESE	NTATION OF MU	JETIPLE DEF	JLTIPLE DEPENDENT		CLAIM		+135=	Ī	00	+270=	
				ė			L	TOTAL	:	OR	TOTAL	
								ADDIT. FEE		OR	ADDIT. FEE	
_		(Column 1) CLAIMS			mn 2) IEST	(Column 3)				· ,		.
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL- FEE		RATE	ADDI- TIONAL FEE
	Total	th.	Minus	**		=		X\$ 9=	, .	OR	X\$18=	
	Independent	•	Minus	***		=]	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										_ '	: 44
	f the entry in colu	mn 1 je lace than ti	he entry in colu	ımn 2 writ	e "()" in ~	alumn 3	l	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
İ	The "Highest Nun	nber Previously Pa	id For" (Total o	r Independ	lent) is the	e highest number	er fou	nd in the app	ropriate box	in col	lumn 1.	